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Pistachios May Help Lower Cholesterol



Looking for a healthy snack? Pistachios may be just the ticket. New research confirms earlier studies that the little green nuts may help lower artery-clogging LDL or "bad" cholesterol.

Penn State University researchers report in a recent issue of the *Journal of Nutrition* that people on pistachio-rich diets had lower LDL and higher antioxidant levels.

Antioxidants are nutrients that protect the body against damage caused by free radicals. Free radicals are the by-products of some normal body functions. They're also in environmental factors like pollution, radiation, cigarette smoke, and pesticides. Experts believe they can increase the risk of heart disease, cancer and other conditions.

Study participants ate three different heart-healthy diets designed to lower cholesterol. They stayed on each one for about four weeks (with a two-week break between them). Two of the diets included pistachios--one 1.5 ounces a day (10 percent of calories) and the other 3.0 oz of pistachios (20 percent of calories) daily.

According to the study, both pistachio diets resulted in lower LDL levels and higher amounts of the antioxidants beta-carotene (vitamin A), lutein (important for the eyes and skin) and vitamin E. *So go nuts!*



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Pistachios May Help Lower Cholesterol

Sun Safety: The Skinny on Skin Cancer

Skin cancer is the most common type of cancer, accounting for nearly half of all cancers in the U.S. More than a million cases are diagnosed in the U.S. each year. The American Cancer Society (ACS) estimates that nearly 70,000 new cases of melanoma – the most serious kind of skin cancer – will be diagnosed in 2010.

Melanoma begins in cells known as melanocytes. These cells produce pigment (skin color) known as melanin. Melanoma is very dangerous, because it can spread to other body organs. The ACS predicts that nearly 12,000 people will die from skin cancer in the U.S. this year, some 8,650 from melanoma. The good news is that skin cancer can be prevented and successfully treated if found early.

Reduce your risk. The No. 1 way to reduce your skin cancer risk is to limit exposure to ultraviolet (UV) rays from the sun and tanning beds.

Other safeguards:

- **Wear Sunscreen.** Apply a water-resistant sunscreen with a sun protection factor (SPF) of at least 30 daily. Re-apply after swimming and/or sweating.
- **Cover Up.** Wear sunglasses, a wide hat and other protective clothing.
- **Seek Shade.** Stay in the shade or under an umbrella, especially between 10 a.m. and 4 p.m. when the sun's rays are strongest. Use caution near water, snow and sand. They reflect the sun's damaging rays, increasing the chance of sunburn.
- **Check Skin.** Visit a dermatologist (skin doctor) yearly for a skin cancer check. And regularly check the size, shape and/or color of your own moles. Call a dermatologist if you notice changes in any of them or if any of your moles hurt, bleed, become scaly or if pigmentation spills over their borders.

Working Overtime May Be Hazardous to Your Heart

Routinely work overtime? Take it easy. The extra hours may be good for your pocketbook. But they apparently take a toll on your ticker.

A recent study found that people who regularly work three or more hours over the normal seven hours daily are 60 percent more likely than people who don't put in the extra time to have heart-related problems. Among them: heart attacks, angina (chest pain) and even death from heart disease.

According to the long-term study, men were six times more likely than women to work three or more hours of overtime daily. And married workers were nearly nine times more likely than single workers to put in 10-plus hour days.

Researchers aren't certain why working overtime may up the risk of heart disease. But they speculate problems like job-related stress and lack of sleep may play a role.

Previous studies have linked chronic stress to an increased risk of ills from cancer to heart disease. Plus, employees who regularly log extra hours are more likely to ignore medical problems and work even when they're sick.

The findings come in the wake of mounting evidence linking long workdays to a heightened risk of health problems, including high blood pressure. High blood pressure is a known heart disease risk factor.

The study, published online in the *European Heart Journal*, followed some 10,000 British civil servants for over a decade. The workers were in their late 30s to early 60s when first enrolled.

Researchers' advice: Slow down—and try to balance work, family and leisure time. Your heart may depend on it!



Pets v. Allergies: Would You Ditch Your Dog?

What would you do if you discovered you were allergic to your beloved pet? Would you get rid of your furry friend – or live with the sniffles, watery eyes, wheezing and other allergy symptoms?

Seems pet owners are a hearty – and loyal – bunch. A recent Japanese study found that one in four people keep their pets despite allergies and/or asthma.

The American Academy of Allergy Asthma & Immunology estimates that nearly 10 million U.S. pet owners, including kids, are allergic to their animals.

Do you have an allergic reaction to your pet or, rather, to its dander (flakes of dead skin), saliva or urine – but can't bear to part with it?

Here are some tips to make life easier around your less-than-*purrfect* pals:

- Keep pets out of the bedroom and out of doors as much as possible.
- Keep pets off carpets and upholstered furniture. Cover furniture with towels and sheets—and wash them a lot.
- Wash pets weekly.
- Wash your hands after touching pets.
- Ask your doctor about allergy shots.
- Ask someone without allergies to brush pets.
- Toss rugs or shampoo them with allergen-removing solutions.
- Keep kitty litter boxes away from vents if you have central heating or air conditioning – and have someone else clean them.
- Use a HEPA air purifier/filter to trap dander.
- Ask your vet about a pet diet that may minimize dry skin and shedding.

Have an allergic child desperate for a new pup? Unfortunately, there are no truly hypoallergenic dogs. But there are breeds that produce less dander and don't shed a lot (and, so, don't leave as much dander-filled fur around the house). Among them: Schnauzers, Poodles, Bichon Frises and Portuguese Water Dogs like Bo, the nation's first pooch.

Are Tanning Beds Safe?

In a word –*no!* Forget all those tales about tanning beds being less harmful than the sun. Ultraviolet (UV) light from tanning beds – just like from the sun – can cause skin cancer and premature wrinkling.

According to a new study, published in the journal *Cancer Epidemiology, Biomarkers & Prevention*, regular use of tanning beds triples – and in some cases even quadruples



-- the risk of developing melanoma, the deadliest form of skin cancer.

The study, the largest of its kind to date, found that frequent indoor tanners were 74 percent more likely to develop skin cancer than people who never used a tanning bed. The risk was four

times greater for frequent users of high-pressure tanning beds that emit mostly UVA radiation.

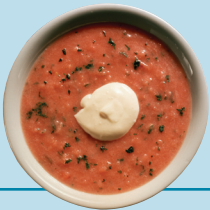
Melanoma is one of the fastest-growing cancers among whites. The number of cases jumped by about 2 percent each year between 1997 and 2006. During the same period, indoor tanning skyrocketed in the U.S., especially among young women. Industry experts estimate that more than 30 million Americans now use commercial tanning beds each year. According to the American Cancer Society (ACS), nearly 70 percent of tanning bed users are women, mostly between the ages of 16 and 29.

The International Agency for Research on Cancer, part of the World Health Organization, recently raised tanning beds to its highest cancer risk category. It made the move in response to recent research published in *The Lancet Oncology* that found:

- One burn in a tanning booth equals 10 to 12 sunburns
- People who use tanning beds before age 30 up their risk of melanoma by 75 percent

Remember that next time you think about ducking into a tanning salon. You may think a tan gives you a "healthy" glow, but the truth is it's anything but healthy. Still crave that sun-kissed look? Consider a sunless tanning cream or spray.

Recipe: GAZPACHO



Looking for the perfect summer dish? Try this heart-healthy recipe (from the National Heart Lung and Blood Institute) for gazpacho. This tasty chilled soup is full of fresh veggies & free of artery-clogging cholesterol!

Ingredients

4 C	Tomato juice*
1/2	Medium onion, peeled and coarsely chopped
1	Small green pepper, peeled, cored, seeded, and coarsely chopped
1	Small cucumber, peeled, pared, seeded, and coarsely chopped
1/2 tsp	Worcestershire sauce
1 clove	Garlic, minced
1 drop	Hot pepper sauce
1/8 tsp	Cayenne pepper
1/4 tsp	Black pepper
2 Tbsp	Olive oil
1 large	Tomato, finely diced
2 Tbsp	Minced chives or scallion tops
1	Lemon, cut in 6 wedges

Directions

- Put 2 cups of tomato juice and all other ingredients except diced tomato, chives, and lemon wedges in the blender.
- Puree.
- Slowly add the remaining 2 cups of tomato juice to pureed mixture. Add chopped tomato. Chill.

Serve icy cold in individual bowls garnished with chopped chives and lemon wedges.

Yield: 6 one-cup servings.

Each serving provides:

Calories: 87, Total fat: 5 g

Saturated fat: less than 1 g

Cholesterol: 0 mg, Sodium: 593 mg*

*Try low-sodium tomato juice to lower sodium content.

Protect your Children’s Health

Use this chart as a handy reference.
CDC/ACIP Recommended Childhood and Adolescent Immunization Schedule 2010:

AGE GROUPS:	Birth	1mo	2mo	4mo	6mo	12mo	15mo	18mo	4-6yrs	11-12yrs
HepB – Protects against hepatitis B	☉	Between 1-2 months		☉ if needed	Between 6-18 months					
HepA – Protects against hepatitis A						☉ Between 12-23 months (2 doses at least 6 months apart)		Recom-mended for certain high risk groups	Recom-mended for certain high risk groups	
Hib – Protects against Haemophilus influenza type b (which causes spinal meningitis)			☉	☉	☉ (May be needed according to type of vaccine used)	Between 12-15 months				
DTaP – Protects against diptheria, tetanus (lock jaw) and pertussis (whooping cough)			☉	☉	☉		Between 15-18 months	☉	Tdap booster at 11-12 and every 10 years thereafter	
Inactivated polio vaccine – Protects against polio			☉	☉	Between 6-18 months			☉		
MMR – Protects against measles, mumps and rubella (German measles)						Between 12-15 months		☉		
Varicella vaccine – Protects against chickenpox						Between 12-15 months		☉		
Influenza vaccine – Protects against the flu	Recommended yearly for ages 6 months to 18 years. 2 doses needed 4 weeks apart for children aged ≤ 8 years old receiving vaccine for the first time or who were vaccinated for the first time the previous year and received only one dose.									
Pneumococcal vaccine – Protects against pneumonia, blood infections and meningitis caused by the pneumococcus bacterium			☉	☉	☉	Between 12-15 months			Recommended for certain high risk groups	
Rotavirus vaccine (Rota) – Protects against severe, dehydrating infection and inflammation of the stomach and intestinal tract			☉	☉	☉					
Meningococcal vaccine – Protects against meningococcal meningitis									☉	
Human papillomavirus – Protects against human papillomavirus associated with genital warts in both sexes and cervical cancer in females.									Females: HPV (3 doses at age 11-12 or at age 13-18 if no prior vaccination) Males: HPV4 (3 doses at age 9-18 years)	

The following immunizations are recommended for children and adolescents in **certain high-risk groups**. Talk with your doctor to determine if these immunizations are needed for your child.

Pneumococcal vaccine - Additionally between 24 months and 18 years.

Hepatitis A vaccine - Two doses at least six months apart from ages 2-18 years.

Meningococcal vaccine - One dose by age 18 if not already vaccinated, and for previously unvaccinated college freshmen living in dormitories. Recommended for certain high risk groups at age 2-10 years. Revaccination interval is 3 to 5 years for high risk groups.

Flu shot locator: - Go to the following US Department of Health and Human Services web site to locate flu shot clinics in your area: <http://www.flu.gov/individualfamily/vaccination/locator.html>



All Adults

Living healthy includes having the right tests, exams, and immunizations at the right time.
The following charts can help guide you. Ask your doctor what’s right for you.

ADULT AGE GROUPS	18-20	21-29	30-34	35-39	40-44	45-49	50-64	65-69	70+
Td booster – protects against diphtheria and tetanus	1 booster dose every 10 years								
HPV vaccine – Protects against human papillomavirus associated with cervical cancer in females	All females ≤ 26 years old not previously vaccinated (3 doses at 0, 2, 6 months apart)								
Influenza vaccine – Protects against the flu	1 dose yearly for adults with chronic conditions, pregnant women and all healthcare workers						1 dose yearly	1 dose yearly	1 dose yearly
Hepatitis B vaccine – Protects against hepatitis B	3 doses over 6 months for those at risk of exposure to this virus or those with some chronic illnesses								
Hepatitis A vaccine – Protects against hepatitis A	2 doses over 6-18 months for those at risk, such as clotting factor disorders, liver disease, homosexuals, recreational drug users, or health care workers								
MMR – Protects against measles, mumps and rubella. A second dose may be recommended for some individuals. Rubella vaccine should not be given to pregnant women or those planning to become pregnant in the next 4 weeks.	At least 1 dose for adults born in 1957 or later and not previously infected or vaccinated								
Varicella vaccine – Protects against chicken pox. Varicella vaccine should not be given to pregnant women or those planning to become pregnant in the next 4 weeks.	2 doses 4-8 weeks apart for anyone not previously vaccinated or infected with chicken pox								
Pneumococcal vaccine – Protects against pneumococcal pneumonia	1-2 doses for those with medical conditions such as chronic heart, lung (including asthma), kidney or liver disease diabetes, sickle cell, some cancers, chemotherapy, chronic alcoholism , cerebrospinal fluid leaks or HIV infection. One dose revaccination after 5 years is recommended for conditions that affect the immune system. Residents of nursing homes and persons who smoke cigarettes should be vaccinated.							One dose if never vaccinated or if vaccinated ≥5 years ago when under the age of 65.	
Zoster – Protects against herpes zoster.							One dose for adults aged ≥60 years.		

EXAMS & TESTS					
Physical exams, including blood pressure, cholesterol levels, blood sugar and skin examination	Ask your doctor about your recommended frequency		Every 1-3 years. Exam should include kidney, liver and thyroid function		
Dental check-ups	At least yearly				
At least one of the following tests to screen for colon cancer per US Preventive Services Task Force:	Fecal Occult Blood Test (FOBT)		Yearly	Yearly	Yearly through age 75
	Flexible sigmoidoscopy		Every 5 years	Every 5 years	Every 5 years through age 75
	Colonoscopy ** All positive tests should be followed up with colonoscopy. People with the following colorectal cancer risk factors should talk with their doctor about screening earlier and/or undergo screening more often: <ul style="list-style-type: none">• Personal history of colorectal cancer or adenomatous polyps• Strong family history for colorectal cancer or polyps• Chronic inflammatory bowel disease		Every 10 years	Every 10 years	Every 10 years through age 75